

# Research Highlights

From the Survey Research Laboratory at  
Virginia Commonwealth University's Center for Public Policy

No. 5

August 1997

*Research conducted for the Virginia HIV Community Planning Committee*

## A STUDY OF VIRGINIA CLERGY CONCERNING HIV AND AIDS

A recent study of a sample of clergy in Virginia found that most clergy expressed acceptance for people with HIV/AIDS, said they feel responsible for providing pastoral care to them, and were tolerant of homosexuality. They also perceived their congregations to hold more traditional attitudes than their own on all these issues.

These were among the most striking findings of a mail survey of 711 members of the clergy in Virginia conducted by the Survey Research Laboratory of Virginia Commonwealth University in 1996. The survey was sponsored by the statewide HIV Community Planning Committee and funded by the federal Centers for Disease Control and Prevention.

The various denominations in Virginia were asked to provide their mailing lists for inclusion in this survey on clergy reactions to HIV/AIDS. Some denominations declined to provide their lists, among them the Southern Baptists, Mormons and most African-American denominations.

The resulting sample was made up primarily of white clergy; more than half the sample were from the United Methodist Church, with Presbyterian, Episcopal, Roman Catholic, Orthodox, fundamentalist Christian and Jewish clergy also represented.

Another study will be implemented during the fall of 1997 to obtain information on similar issues from African-American clergy.

### Impact of HIV/AIDS

Twenty percent of respondents said they know that someone in their congregation has tested positive for HIV. Most of these clergy (90 percent) estimate that the number of such cases has been five or fewer. Seventy percent said there had been one or two HIV+ people in their congregations. Nineteen percent of the total sample said that someone in their congregation had been diagnosed with AIDS. Seventy-seven percent of this group of clergy reported that as many as two people in their congregations have died of AIDS.

### Clergy Compared to Congregations

Clergy attitudes toward a range of HIV/AIDS-related issues were quite different from their perceptions of their congregations' attitudes.

While 76 percent of clergy agreed that people with HIV/AIDS should be protected by laws banning discrimination, only 61 percent perceived their congregations to feel the same way. And while only 10 percent believed AIDS is God's punishment for immoral behavior, 36 percent said their congregations believe AIDS is a punishment from God.

While 37 percent agreed that the *condition* of being homosexual displeases God, 68 percent said their congregations believe this condition displeases God. Fifty-six percent agreed that homosexual *behavior* displeases God, while 79 percent said their congregations agree with this.

In addition, 31 percent agreed that by definition gays and lesbians are unfit parents, compared to 66 percent who perceived that their congregations agree with this.

Thirty-one percent said they agree that sexual abstinence is the only way to prevent HIV/AIDS, while 58 percent said their congregations agree with this position.

One of the most controversial measures proposed for the prevention of HIV/AIDS is the distribution of clean needles to IV drug users, a practice that is illegal in Virginia. Forty-seven percent of this sample of clergy agreed with this policy as an AIDS prevention measure. However, only 18 percent perceived that their congregations would agree with it.

Figure 1 compares clergy attitudes and their perceptions of their congregations' attitudes across a wide range of questions. In addition to the specific questions asked above, clergy were asked several questions about each of the various issues mentioned above – e.g., homosexuality, sexual abstinence, condoms and clean needle exchange as AIDS prevention strategies, AIDS as God's retribution for immoral behavior, and discrimination against people with HIV/AIDS. Questions about each



issue were combined to form two indexes for each issue, one index summarizing the clergy member's attitude, the other summarizing the clergy member's perception of their congregation's attitude. Comparisons of the two summary indexes show that most clergy perceived their congregations to be more traditional on these issues than they are.

In general, fundamentalist clergy expressed more traditional attitudes than members of other groups. For example, 79 percent of fundamentalist clergy agreed that gays and lesbians are by definition unfit parents, compared to 28 percent of mainstream Protestants and 12 percent of Catholic/Orthodox clergy. Fundamentalist clergy also perceived much less distance between themselves and their congregations than did the Catholic/Orthodox clergy and the mainstream Protestant clergy.<sup>1</sup>

### HIV/AIDS Knowledge

Overall, respondents were very knowledgeable about HIV/AIDS, being aware of the ways in which HIV is and is not spread, the changing nature of the epidemic, and the nature of the disease itself.

For example, only 5 percent thought HIV is likely to be spread by sharing a common communion cup and only 2 percent through baptism by immersion. In addition, strong majorities – 71 percent to 78 percent – knew the rate of HIV infection is increasing among women, young adults (aged 18-24) and among African Americans. Virtually all knew HIV is passed through blood, semen and vaginal secretions, but fewer knew that HIV

#### *The SRL and the HCPC*

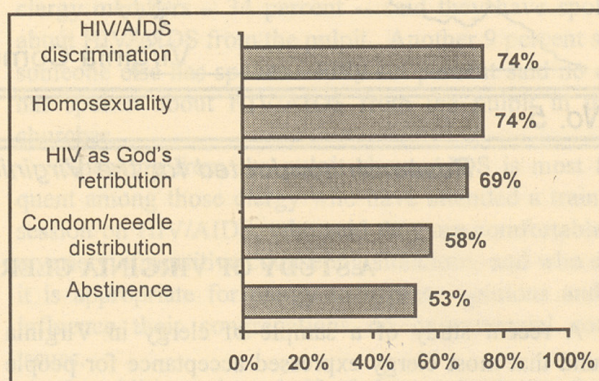
*The Virginia Commonwealth University Survey Research Laboratory, founded in 1982, and incorporated in the University's Center for Public Policy in 1994, serves the University, the community, and local and state governments through some 100 projects annually. The SRL also manages a number of large data sets available through the Inter-university Consortium for Political and Social Research.*

*The SRL conducted the survey discussed in this report for the Virginia HIV Community Planning Committee (HCPC), an advisory committee to the Virginia Department of Health. The HCPC includes representatives from communities across Virginia most affected by the epidemic and is responsible for developing an annual HIV prevention plan for Virginia for submission to the Centers for Disease Control and Prevention.*

*For more information about this survey, the SRL or the HCPC, contact: VCU Survey Research Laboratory, PO Box 3016, Richmond, VA 23284-3016. Our telephone is (804) 828-8813, and fax (804) 828-6133. Or visit the SRL on the World Wide Web at:*

*<http://www.vcu.edu/srl>*

**Figure 1. Percent of clergy reporting that their congregations hold more traditional attitudes than they do themselves on each of five HIV-related issues.**



can be passed by a mother to her baby through breast milk; 33 percent said this was definitely or probably true, while 24 percent said they did not know.

Respondents were less clear about state policies toward those with HIV/AIDS. For example, only 44 percent said it is definitely or probably true that Virginia requires reporting the names of HIV/AIDS positive people to the Virginia Department of Health; and only 28 percent said it is definitely or probably true that the VDH can provide names of these people to local health departments. Current Virginia law includes both these HIV/AIDS policies.

Out of 20 questions designed to measure respondents' HIV/AIDS knowledge, 41 percent of respondents answered 18-20 correctly, 49 percent answered 11-17 correctly, and only 10 percent answered 10 or fewer correctly. The mean number of correct responses was 15.64 of 20. Fundamentalist clergy showed the lowest mean at 12.60, Catholic/Orthodox the highest at 16.77, and mainstream Protestant in between at 15.91.

### Clergy Responsibility Concerning HIV/AIDS

Seventy-one percent of respondents thought it is very important to welcome individuals with HIV/AIDS into their congregations. They felt less responsibility for other actions, with slightly more than a quarter feeling very responsible for educating their congregations about HIV/AIDS, helping other clergy or pastoral leaders become more sensitive to HIV/AIDS, or participating in community efforts to increase awareness of HIV/AIDS.

<sup>1</sup> The "fundamentalist" category includes respondents from Church of God and Pentecostal Holiness. "Catholic/Orthodox" includes clergy from Greek Orthodox and Eastern Orthodox churches, and from the Catholic Diocese of Richmond. "Mainstream Protestant" includes clergy from Episcopal, Presbyterian, and Methodist churches.



Fundamentalist clergy expressed less sense of responsibility than clergy of other denominations. For example 56 percent of fundamentalist clergy said they felt very responsible for accepting a person with HIV/AIDS into their congregations, compared to 88 percent of Catholic/Orthodox and 70 percent of mainstream Protestant clergy.

### Training Needs

About half of all respondents – 46 percent – said they had attended a training session about HIV/AIDS, with the largest number of these saying the sessions concerned basic information about HIV/AIDS and its transmission routes. Only 8 percent of fundamentalist clergy reported attending such training sessions, as compared to 62 percent of Catholic/Orthodox clergy and 50 percent of mainstream Protestant clergy.

From a list of 15 questions about various kinds of HIV/AIDS training, these clergy said the most pressing needs were for training in referral resources for people with HIV/AIDS, in providing spiritual counseling for persons with HIV/AIDS, and in helping their congregations accept persons with HIV/AIDS. The areas in which they felt the lowest need for training were in the transmission of HIV and in developing church policy on HIV/AIDS.

Across most of the training needs, fundamentalist respondents expressed somewhat higher need for training.

### Comfort Level in Counseling Situations

Clergy are important sources of counseling in their congregations. However, their comfort level with counseling varies with the topic. Sixty-one percent said they were very comfortable providing spiritual care to people affected by HIV/AIDS. While 57 percent said they were very comfortable talking about sex with heterosexual individuals, only 38 percent expressed this level of comfort with talking about sex with bisexual or homosexual individuals. Only 37 percent said they were very comfortable discussing drug use practices with IV drug users.

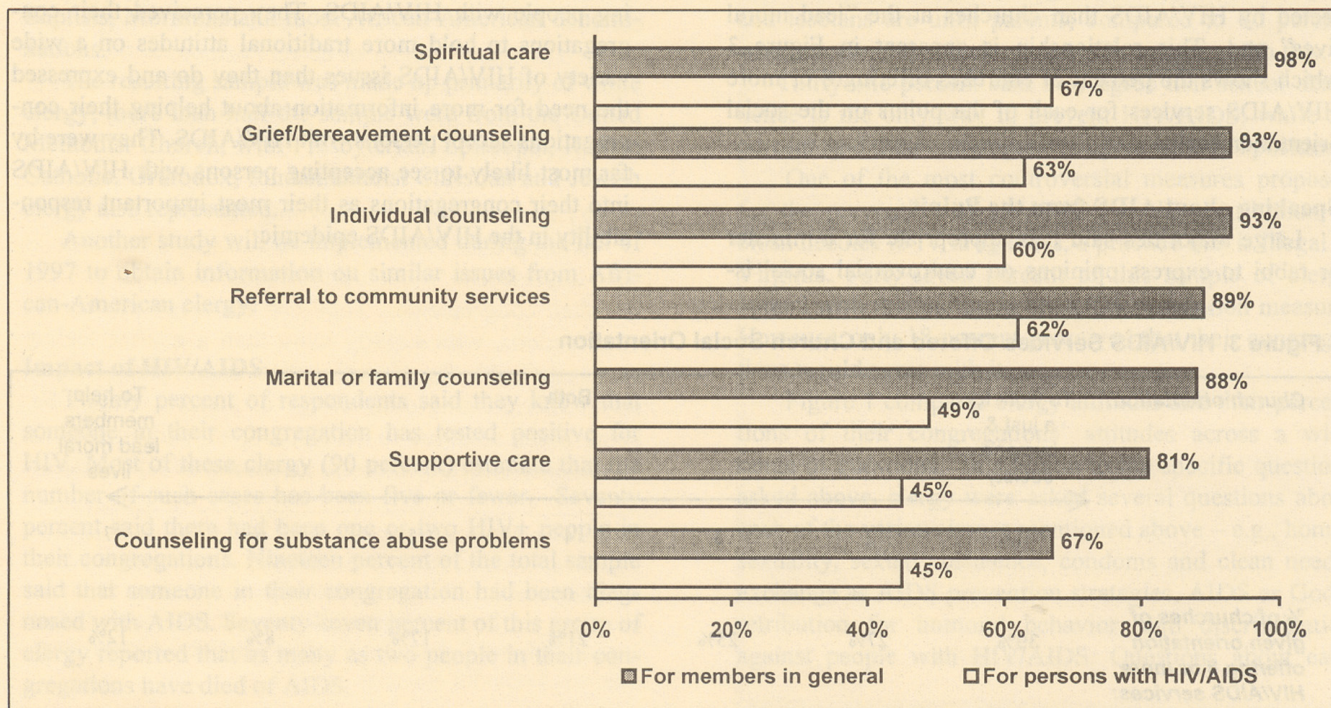
The fundamentalists were the least comfortable and the Catholic/Orthodox clergy most comfortable in these sensitive counseling situations.

### Programs and Services Provided by Churches

Churches typically provide a wide range of services to their congregations and their communities. Figure 2 shows while churches offer a very wide range of services to their members in general, the frequency of such services designed specifically for persons with HIV/AIDS is much lower.

For example, 93 percent said they provide grief or bereavement counseling to their members generally, compared to 63 percent for persons with HIV or AIDS. Similarly, 89 percent said their churches provide referrals to community services to their members in general

**Figure 2: Percent of churches providing services for members in general and services designed specifically for persons with HIV or AIDS.**





compared to 62 percent for persons with HIV or AIDS.

In addition, 19 percent said their churches offer HIV/AIDS prevention programs. The likelihood of providing such services is related to other factors: clergy comfort in counseling on sensitive issues, perceived responsibility to help with HIV/AIDS prevention, attendance at HIV/AIDS training, and less traditional attitudes on HIV/AIDS issues. Thirty percent of clergy who had attended training said their churches offer prevention programs, as compared to 10 percent of those who had not.

### Social Orientation of Churches

These clergy were asked if the main orientation of their churches was to "work for a more just and humane society" or to "help members lead moral lives." They responded on a seven-point scale with these statements at the extremes.

Nearly half said their churches emphasize both orientations equally. However, overall the group tended toward the "help individuals lead moral lives" statement, with 33 percent at this end of the scale, compared to 20 percent at the "work for a more just and humane society" end.

Denominations differed in their positions on this scale, with 49 percent of the fundamentalists compared to 20 percent of the Catholic/Orthodox clergy positioned toward the "help lead moral lives" end.

This orientation seems to matter when it comes to the church's approach to HIV/AIDS. For example, the churches closer to the "just and humane society" end of the scale are likely to offer more services to those affected by HIV/AIDS than churches at the "lead moral lives" end. This relationship is apparent in Figure 3 which shows the percent of churches offering 8 or more HIV/AIDS services for each of the points on the social orientation scale.

### Speaking about AIDS from the Pulpit

Large majorities said it is appropriate for a minister or rabbi to express opinions on controversial social is-

ues (93 percent) and to influence opinions of church members on such issues (81 percent).

However, despite this belief that clergy should deal with controversial issues, only about a third of these clergy members -- 34 percent -- said they have spoken about HIV/AIDS from the pulpit. Another 9 percent said someone else has spoken. Fifty-six percent said no one has spoken about HIV/AIDS from the pulpit in their churches.

Speaking from the pulpit about AIDS is most frequent among those clergy who have attended a training session on HIV/AIDS, who said they are comfortable in a variety of sensitive counseling situations, and who said it is appropriate for clergy to express opinions and to influence their congregations on controversial social issues.

In addition, about half of those who knew that a member of their congregation has been diagnosed with HIV or AIDS said they have spoken about HIV/AIDS from the pulpit, compared to about a third of those who said no one in their congregations has had HIV or AIDS or that they don't know.

Fifty-five percent of fundamentalist clergy said they have spoken about HIV/AIDS from the pulpit compared to 42 percent of Catholic/Orthodox clergy and 29 percent of mainstream Protestant clergy. Clergy were not surveyed about the content of these HIV-related messages.

### Conclusion

While most members of the clergy were quite knowledgeable about HIV/AIDS, they expressed a need for information about resources and strategies for assisting people with HIV/AIDS. They perceived their congregations to hold more traditional attitudes on a wide variety of HIV/AIDS issues than they do and expressed the need for more information about helping their congregations accept persons with HIV/AIDS. They were by far most likely to see accepting persons with HIV/AIDS into their congregations as their most important responsibility in the HIV/AIDS epidemic.

Figure 3. HIV/AIDS Services Offered and Church Social Orientation

